



PHILIP L. BROWNING
Director

County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place, Los Angeles, CA 90020
(213) 351-5602

August 10, 2012

To: Supervisor Zev Yaroslavsky, Chairman
Supervisor Gloria Molina
Supervisor Mark Ridley-Thomas
Supervisor Don Knabe
Supervisor Michael D. Antonovich

Board of Supervisors
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From: Philip L. Browning
Director

A handwritten signature in dark ink, appearing to be "P. Browning", written over the printed name and title.

HANNAH'S CHILDREN'S HOMES FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW

The Out-of-Home Care Management Division (OHCMD) conducted a review of Hannah's Children's Homes Foster Family Agency (Hannah's FFA) in January 2012, at which time they had three offices supervising 138 placed Los Angeles County Department of Children and Family Services (DCFS) children in 59 certified homes.

Hannah's FFA has three offices, one located in the First Supervisorial District, another located in Orange County and a third in San Bernardino County. All offices provide services to DCFS foster youth. According to Hannah's FFA's program statement, its stated goal is "to ensure these children are provided with a continuum of care, nurturance and services, which will meet their individualized needs, as well as those of their families." Hannah's FFA is licensed to serve children ages 0 through 17.

For the purpose of this review, 12 placed children were selected for the review. Six placed children were interviewed, as the other six were non-verbal. The placed children's overall average length of placement was 10 months, and the average age was nine. All 12 sampled children's case files were reviewed. Four certified foster parents' files, four discharged files and five staff files were reviewed for compliance with Title 22 Regulations and the County contract requirements.

Three placed children were prescribed psychotropic medication. We reviewed their case files to assess timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm that documentation of psychiatric monitoring was maintained as required.

SCOPE OF REVIEW

The purpose of this review was to assess the Agency's compliance with the County contract and State regulations. The visit included a review of the Agency's program statement, administrative internal policies and procedures, 12 placed children's case files, four certified foster parent files, four discharge files and five personnel files. Four certified foster homes were visited to assess the quality of care and supervision provided to children and we conducted interviews with the children to assess the care and services they were receiving.

A copy of this report has been sent to the Auditor-Controller (A-C) and Community Care Licensing (CCL).

SUMMARY

During our review the children interviewed reported feeling safe, being provided with appropriate services and good care, being comfortable in their environment and treated with respect and dignity.

The deficiencies noted during the monitoring review were related to contacting OHCMD regarding historical information on prospective certified foster parents; the Needs and Services Plans (NSPs) were not comprehensive, and staff not encouraging or assisting placed children in maintaining a Life Book/photo album.

Based on our review, the aforementioned deficiencies revealed the need for more thorough documentation. Additionally, routine monitoring of the files by supervisory staff would appear to eliminate the documentation issues found in the files.

In conclusion, Hannah's FFA was receptive to implementing some systemic changes to improve their compliance with regulatory standard. The Agency agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

NOTABLE FINDINGS

The following are the notable findings of our review:

- Of the four certified foster parent files reviewed, one did not have documentation of OHCMD being contacted for historical information regarding abuse and/or neglect of a prospective certified foster parent. The Agency's representatives agreed with the finding. OHCMD did conduct a subsequent background check

on the certified foster parent and there was nothing in the certified foster parent's background that would preclude him/her from being a resource for DCFS placed children. The Executive Director stated that the Quality Assurance staff will now ensure that OHCMD is contacted for historical information prior to the certification of prospective foster parents and that this requirement has been added to the FFA's pre-certification audit.

- It was noted that updated NSPs were not comprehensive, the NSP goals were not measurable and time-limited and some did not include monthly contacts with Children Services Workers (CSWs). We did note that monthly contacts were documented in the Agency Social Workers case notes. Additionally, Hannah's FFA representatives attended NSP training conducted by OHCMD in January 2012. The Executive Director stated that Agency social work staff would be provided with follow-up NSP training, including a writing workshop.
- Of the 12 children interviewed, nine were not encouraged or assisted in maintaining a life book/photo album. The Agency representatives stated that life book/photo albums would be distributed to the certified parents.

The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the Exit Conference held March 27, 2012.

In attendance:

Kimberly Berry, Executive Director, Connie Franks, Executive Director, Armando Juarez, Administrator, Hannah's Children's Homes FFA and Greta F. Walters, Monitor, DCFS OHCMD.

Highlights:

The Executive Directors, Kimberly Berry and Connie Franks were in agreement with the findings and recommendations. They reported that the Agency would make corrections to improve its compliance with regulations and the contract.

Hannah's FFA submitted an approved written CAP, which addressed each recommendation noted in this compliance report. The approved CAP is attached.

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We will assess for full implementation of the recommendations during our next monitoring review.

If you have any questions, please call me or your staff may contact Aldo Marin, Board Relations Manager, at (213) 351-5530.

PLB:RRS:KR
EAH:Nf:gfw

Attachments

- c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Public Information Office
Audit Committee
Kimberly Berry, Executive Director, Hannah's Children's Homes FFA
Connie Franks, Executive Director, Hannah's Children's Homes FFA
Jean Chen, Regional Manager, Community Care Licensing

**HANNAH'S CHILDREN'S HOMES FOSTER FAMILY AGENCY
MONITORING REVIEW SUMMARY**

Los Angeles County-site
152 west Walnut Street Suite 150
Gardena, CA 90248
License Number: 197805297

Riverside County-site
12981 Perris Blvd. Suite 208
Moreno Valley, CA 92553
License Number: 336408474

San Bernardino County-site
14606 Main Street, # A
Hesperia, CA 92345
License Number: 366423518

	Contract Compliance Monitoring Review	Findings: January 2012
I	<u>Licensure/Contract Requirements</u> (6 Elements) <ol style="list-style-type: none"> 1. Timely Notification for Child's Relocation 2. SIRs Documented and Cross-Reported 3. Runaway Procedures 4. Community Care Licensing Citations, Out-of Home Care Management Division Reports on Safety and Physical Deficiencies 5. If Applicable, FFA Ensures Complete Required Whole Foster Family Home Training 6. FFA pays Certified Foster Parents Whole Foster Family Home Payments 	Full Compliance (ALL)
II	<u>Certified Foster Homes</u> (13 Elements) <ol style="list-style-type: none"> 1. Home Study Prior to Certification 2. Contact with References/Including Check with OHCMD 3. Safety Inspection Prior to Certification 4. Timely DOJ, FBI, CACI 5. Health Screening Prior to Certification 6. Required Training Prior to Certification 7. Current Certificate of Approval on File Including Capacity 8. Home Inspection/Evaluations for Re-certification 9. Completed Training Hours for Re-certification 10. CPR/First-Aid/Water Safety Certificates 11. CDL/Auto Insurance 12. Other Adults: DOJ/FBI/CACI/Other Required Doc 13. Transportation 	<ol style="list-style-type: none"> 1. Full Compliance 2. Needs Improvement 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Full Compliance 12. Full Compliance 13. Full Compliance

III	<u>Facility and Environment</u> (8 Elements) <ol style="list-style-type: none"> 1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedrooms/Interior Maintained 4. Sufficient Recreational Equipment 5. Sufficient Educational Resources 6. Adequate Perishable and Non Perishable Food 7. Disaster Drills Conducted 8. Allowance Logs 	Full Compliance (ALL)
IV	<u>Maintenance of Required Documentation and Service Delivery</u> (11 Elements) <ol style="list-style-type: none"> 1. DCFS CSW Authorization to Implement NSPs 2. Children's Participation in the Development of NSPs 3. NSPs Implemented and Discussed with Foster Parents 4. Children's Progress Towards Meeting Goals 5. Timely Developed Initial NSPs with Child 6. Timely Comprehensive Initial NSPs with Child 7. Therapeutic Services Received 8. Recommended Assessments/Evaluations Implemented 9. DCFS CSWs Monthly Contacts Documented 10. Timely Developed Updated NSPs with Child 11. Timely Comprehensive Updated NSPs with Child 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Needs Improvement 10. Full Compliance 11. Needs Improvement
V	<u>Education and Workforce Readiness</u> (7 Elements) <ol style="list-style-type: none"> 1. Children Enrolled in School Within Three Days 2. Children Attending School as Required 3. Agency Facilitates Child's Educational Goals 4. Child's Academic and/or Attendance Increase 5. Current IEPs Maintained 6. Current Report Cards Maintained 7. Agency Facilitates Children's Participation in YDS/Equivalent/Vocational Programs 	Full Compliance (ALL)

VI	<u>Health and Medical Needs</u> (6 Elements) <ol style="list-style-type: none"> 1. Initial Medical Examinations Conducted 2. Initial Medical Examinations Timely 3. Follow-up Medical Examinations Timely 4. Initial Dental Examinations Conducted 5. Initial Dental Examinations Timely 6. Follow-up Dental Examinations Timely 	Full Compliance (ALL)
VII	<u>Psychotropic Medications</u> (2 Elements) <ol style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review 	Full Compliance (ALL)
VIII	<u>Personal Rights and Emotional Well-Being</u> (13 Elements) <ol style="list-style-type: none"> 1. Children Informed of Foster Home's Policies and Procedures 2. Children Feel Safe 3. Satisfaction with Meals and Snacks 4. Foster Parents Treatment of Children with Respect and Dignity 5. Appropriate Rewards and Discipline System 6. Children Allowed Private Visits, Calls and Correspondence 7. Children Free to Attend Religious Services/Activities 8. Reasonable Chores 9. Children Informed About Psychotropic Medication 10. Children Aware of Right to Refuse Psychotropic Medication 11. Children Informed About Voluntary Refusal of Medical and Dental Care 12. Children Participation in At-Home, School, Community Activities 13. Children Participation in Extra-Curricular Activities 	Full Compliance (ALL)
IX	<u>Personal Needs/Survival and Economic Well-being</u> (8 Elements) <ol style="list-style-type: none"> 1. Clothing Allowance 	1. Full Compliance

	<ol style="list-style-type: none"> 2. On-going Clothing Inventories of Adequate Quantity 3. On-going Clothing Inventories of Adequate Quality 4. Involvement in Selection of Clothing 5. Provision of Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance 8. Encouragement and Assistance with Life Book 	<ol style="list-style-type: none"> 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Needs Improvement
X	<p><u>Discharged Children</u> (3 Elements)</p> <ol style="list-style-type: none"> 1. Stabilization of Placement Prior to Discharge 2. Discharge Summary Completed 3. Child Completed High School 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Not Applicable
XI	<p><u>Personnel Records</u> (14 Elements)</p> <ol style="list-style-type: none"> 1. DOJ Timely Submitted 2. FBI Timely Submitted (After January 1, 2008) 3. CACIs Timely Submitted 4. Signed Criminal Background Statement Timely 5. Education/Experience Requirement 6. Employee Health Screening Timely 7. Valid Driver's License 8. Signed Copies of FFA Policies and Procedures 9. Initial Training Documentation 10. One-hour Training of Child Abuse Reporting 11. CPR Training Documentation 12. First-Aid Training Documentation 13. On-going Training Documentation 14. Social Workers Appropriate Case Ratio 	Full Compliance (ALL)

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San Bernardino County
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Hesperia, CA 92345
License Number: 366423518

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the January 2012 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review of 12 children's files, four certified foster parent files, four discharged files, and five staff files and/or documentation from the provider, Hannah's FFA was in full compliance with eight of 11 sections of our contract compliance review: Licensure/Contract Requirements; Facility and Environment; Education and Workforce Readiness; Health and Medical Needs; Psychotropic Medication; Personal Rights and Emotional Well-Being; Discharged Children; and Personnel Records. The following report details the results of our review:

CERTIFIED FOSTER HOMES

Based on our review of four certified foster parent case files and/or documentation from the provider, Hannah's FFA was in compliance with 12 of 13 elements reviewed in the area of Certified Foster Homes.

We noted that the Agency did not contact OHCMD for historical information prior to the initial certification of two foster parents; one certified foster parent was not included in the review. OHCMD requested a CAP from the Agency, which was received and approved. The Executive Director stated that the Quality Assurance staff will ensure that OHCMD is contacted for historical information prior to the certification of prospective foster parents and that this requirement has been added to the FFA's pre-certification audit.

Recommendation:

Hannah's FFA's management shall ensure that:

1. OHCMD is contacted for historical information for all prospective certified foster parents prior to certification.

MAINTAINANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

Based on our review of 12 children's case files and/or documentation from the provider, Hannah's FFA was in full compliance with nine of 11 elements reviewed in the area of Maintenance of Required Documentation and Service Delivery.

We noted that updated NSPs were not comprehensive, the NSP goals were not measurable and time-limited and some did not include DCFS CSWs monthly contacts. We did note that monthly contacts were documented in the Agency Social Workers' case notes. Additionally, Hannah's FFA representatives attended NSP training conducted by OHCMD in January 2012. The Executive Director stated that Agency social work staff would be provided with follow-up NSP training, including a writing workshop.

Recommendation:

Hannah's FFA's management shall ensure that:

2. Updated NSPs are comprehensive and include all elements.

PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

Based on our review of 12 children's case files and/or documentation from the provider, Hannah's FFA was in full compliance with seven of eight elements reviewed in the area of Personal Needs/Survival and Economic Well-Being.

We noted that nine children were not encouraged and assisted in creating and maintaining their photo albums/life books. The Executive Director stated that the Agency would purchase photo albums and distribute to the certified foster parents.

Recommendation:

Hannah's FFA's management shall ensure that:

3. Encourage and assist children with the opportunity to create and maintain Life Books/photo albums.

PRIOR YEAR FOLLOW-UP FROM THE AUDITOR-CONTROLLER'S CONTRACT REVIEW REPORT

Objective

Determine the status of the recommendations reported in the prior A-C's last monitoring report.

Verification

We verified whether the outstanding recommendations from the last A-C compliance review report issued January 28, 2010 were implemented.

Recommendations:

The A-C's prior monitoring report contained 11 outstanding recommendations. Hannah's FFA was to ensure that staff adequately monitor foster homes to ensure compliance with Title 22 Regulations and the County contract; foster homes were maintained in accordance with Title 22 Regulations, disaster drills are conducted with the children; foster parents or designated drivers have valid California Driver's licenses; NSPs contained all information required; quarterly reports and Termination reports are prepared timely and indicate date sent to the DCFS social worker; and that Termination reports include a closing summary of the Agency's placement records; DCFS social workers are updated monthly regarding the children's progress. Further, the children taking psychotropic medications have a current court authorization for the medication, and have documentation of monthly evaluations by the prescribing physician. In addition, Hannah's FFA was to ensure that contract social workers signed declarations stating that their combined caseload at all agencies did not exceed 15 children and all employee personnel files contain criminal and Child Abuse Central Index clearances. Based on our follow-up of these recommendations, Hannah's FFA fully implemented 10 of 11 recommendations from the A-C's January 20, 2010 report. Further corrective action was requested of Hannah's FFA.

Hannah's FFA's management shall ensure that:

4. They implement the one outstanding recommendation from the A-C's January 28, 2010 report, which is also noted as Recommendation 2 in this report.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of Hannah's FFA has not been posted by the A-C.



Hannah's Children's Homes
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Lic: 197804303

July 11, 2012

Greta F. Walters, Children's Service Administrator 1
Department of Children and Family Services – OHCIS
9320 Telstar Ave.
El Monte, CA 91731

Dear Ms. Walters,

Subject: Corrective Action Plan (CAP) for Hannah's Children's Homes Compliance Review

1. Section 11, CFH, item #8

Please be advised that modifications were made to the Application Requirement Checklist Form and Certified Parent's File table of content to prevent stated deficiencies. (See attached forms) Hannah's Quality Assurance Staff will monitor all pre-certification requirements to ensure that the foster parent case record includes contacts with references, including check with OHCMD for historical information.

2. Section IV, Maintenance of required documentation and service delivery, item #36

Please see sample of updated quarterly report showing required contact information. The FCSW Supervisors are responsible to ensure that FCSW's have included monthly contacts with DCFS CSW'S and that the contact is appropriately documented.

3. Section IV, Maintenance of required documentation and service delivery, item #38

FCSW's and FCSW Supervisors attended a training for Individual Service Plan Goals. Please see attachment for the roster and certificate of the staff training. FCSW Supervisors are responsible to ensure that FCSW's have developed comprehensive updated Need and Services Plans .

4. Section VIII, Personal Needs/Survival and Economic Well-Being, item #74

Lifebooks or photo albums have been distributed for all foster children. FCSW will ensure that CFP encourage and help the children update a life book or photo album.

If additional information is needed please contact me at 323-278-6501.

Submitted by,

Kimberly Berry, CEO

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